PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10671791

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER SMALL | |
|--|---|---|-------------------------------------|--------------------|----------------------------------|------------------|--------------|--------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS | | | Á | | | | Γ | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMB | ER EXTRA | В | ASIC FEE | 375.00 | OR | BASIC FEE | 750.00 |
| TOTAL CHARGEABLE CLAIMS | | | නි minus 20= | | * & | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | 2 minus 3 = | | * 6 | | | X42= | | OR | X84= | |
| MU | LTIPLE DEPEN | DENT CLAIM P | RESENT | | | | | +140= | | OR | +280= | |
| * If | the difference | in column 1 is | less than zero, enter "0" in columr | | | olumn 2 | L | TOTAL | | OR | TOTAL | 750 |
| | C | LAIMS AS A | MENDED - PART II | | | | SMALL ENTITY | | | OR | OTHER THAN SMALL ENTITY | |
| | | (Column 1) CLAIMS | | | mn 2) HEST | (Column 3) | _ | SWALL | | | SIVIALL | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVI | BER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = . | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | T OL A 184 | = | | X42= | | OR | X84= | |
| Ľ | FIRST PRESE | NTATION OF M | ULTIPLE DEF | ENDEN | 1 CLAIM | | | +140= | | OR | +280= | |
| | | | | | | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colu | ımn 2) | (Column 3) | • | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIG NUM PREV | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X42= | | OR | X84= | |
| | FIRST PRESE | ENTATION OF M | IULTIPLE DEF | PENDEN | IT CLAIM | | ! | +140= | | OR | +280= | |
| | | - | | | | | L | TOTAL | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Coli | umn 2) | (Column 3) | , | ADDIT. FEE | | | ADDIT. FEE | |
| AMENDMENT C | | | | HIG NUI PREV | HEST MBER /IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | [| X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +140= | | OR | | |
| | | umn 1 is less than | | | | | l | TOTAL | | ┫ | L | . |
| * | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |